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CATALOGUE

OF THE SPECIMENS IN THE

PATHOLOGICAL MUSEUM

OF THE

PHILADELPHIA HOSPITAL.

PREPARED BY

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PREFACE.

THIS Catalogue was prepared under unusual difficulties. No attempt had ever been previously made to arrange, label, or catalogue the specimens, of which many have been in the Museum for years, while the nature of almost all had to be determined by inspecting them as mounted in the jars, without unsealing the latter. Some errors may, therefore, have crept in, but the Catalogue is believed to be as accurate as it is possible to make it. The most recent specimens have been fully and accurately described.

JAMES TYSON.

March 1, 1874.

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DESCRIPTIVE CATALOGUE.

OSSEOUS SYSTEM.

1.—**Articulated Skeleton** of a male (normal).

1*a*.—**Articulated Skeleton** of a syphilitic male, exhibiting syphilitic caries of the right femur and innominate bone.

2.—**Incomplete Articulated Skeleton** of a female, wanting right patella, right foot, both hands, and left humerus, radius and ulna (normal).

3.—**Cranium and Face**, vault separated, exhibiting caries of petrous portion of right temporal bone, and perforation of the mastoid cells.

4.—**Vault of Cranium**, exhibiting exostosis eburnea on the inner surface of the frontal bone, and marked thickening throughout.

5.—**Portion of Vault of Cranium**, including two parietal, and portion of frontal bones, exhibiting thickening of the latter.

6.—**Head of Child**, vault separated, exhibiting numerous cranio-tabeal perforations. From a case of rachitis.

6*a*.—**Congenital Cranio-Tabes.**

6*b*.—**Congenital Cranio-Tabes.**

7.—**Vault of Cranium**, exhibiting absorption of the frontal bone—probably from pressure.

7*a*.—**Vault of Cranium**, enormously thickened, and, although including little more than the two parietal bones, weighing 20½ oz. Its thickness ranges from ¼ to ½ inch. A large, irregular fragment, 2¼ by 2½ inches, was removed by necrosis—the result of syphilitic periostitis, which involved the periosteum over nearly the entire vault.

8.—**Vault of Cranium**, exhibiting syphilitic necrosis and hyperostosis of the external table.

9.—**Vault of Cranium**, showing syphilitic exostosis over the sagittal suture, near its middle. The vault has also been trephined in the right parietal bone, one inch from the sagittal suture.

10.—**Fracture of Occipital Bone.**

11.—**Articulated Skeleton of an Infant,** exhibiting meningocele.

12.—**Articulated Skeleton** of an infant, showing sacral spina bifida.

13.—**A portion of Vault of Cranium** along the longitudinal sinus, exhibiting absorption of the diploic structure, from pressure by Pacchionian bodies.

14.—**Circular portion of the Cranium** removed by Dr. F. F. Maury, by trephine, June 14th, 1868; also, pieces of necrosed bone removed from around the opening made by the trephine.

15.—**Vault of Cranium,** exhibiting inter-parietal bone at junction of right frontal and temporal bones.

16.—**Inferior Maxilla,** exhibiting destruction through caries of a large part of the body and left horizontal ramus of the bone.

17.—**Pelvis,** with lumbar and two dorsal vertebræ and thigh bones, articulated; showing caries of the vertebræ, sacrum, left iliac bone, and head of femur at their articulations. The femur is fractured at its head. Osteophytes are also seen on the left iliac bone and femur.

18.—**Articulated Skeleton** of a child about 7 years old, showing caries of last four lumbar vertebræ, with marked posterior angular curvature.

19.—**Articulated Spinal Column,** exhibiting caries of the upper four dorsal vertebræ; also, anterior and posterior curvature, with anchylosi and absorption of inter-articular cartilages.

20.—**Articulated Thorax,** showing caries of the vertebræ, and marked antero-postero-curvature, at nearly a right angle.

21.—**First, Second, Third, and Fourth Lumbar Vertebræ,** exhibiting almost total destruction of the bodies of the second and third.

22.—**Lumbar Vertebra,** the seat of caries, with partial destruction of the articulated facets.

23.—**Lumbar Vertebra,** exhibiting caries of the body of the bone.

24.—**Left half of Sacrum and lower Lumbar Vertebra,** with commencing destruction of articular surfaces of the bones.

25.—**Articulated Pelvis,** including heads of femurs, showing exostosis of descending ramus of left pubic bone.

26.—**Deformed Pelvis,** with numerous exostoses; ossification of the cotyloid ligament and resulting deepening of the acetabulum.

26*a*.—**Caries of the Ischium and Pubic Bone—Osteophytes.**

27.—**Left Innominate Bone,** exhibiting absorption, through caries, of the acetabulum with separation of the ilium, ischium, and pubis.

28.—**Right Innominate Bone,** exhibiting enlargement of the acetabulum from hip-joint disease.

29.—**Left Iliac Bone and Head of Femur,** exhibiting ununited fracture of the neck of femur; large adjacent deposit of callus with attempt to form a new joint.

30.—**Left Innominate Bone and upper half of Left Femur,** exhibiting luxation backwards and upwards of the femur, with absorption of the head of the bone and attempt to form a new joint.

31.—**Right Patella,** exhibiting a portion of ligament inverted and attached to the articulated surface.

32.—**Left Innominate Bone and corresponding Femur,** showing total destruction of the head and neck of the latter, with luxation upwards and outwards, and resulting new articulation; also hyperostitic deformity of acetabulum.

32*a*.—**Comminuted Fracture of the Base of the Neck and Trochanter of the Femur,** with overriding of the lower fragment by the upper. This deformity was thought to be due to the traction of the internal iliac and gluteus medius muscles. The upper end of the lower fragment was forced against the innominate bone so that the anterior superior spinous process was in contact with the border of the lower fragment. The tendon of the internal iliac from its escape from the pelvis to the lesser trochanter was ossified. (Hand specimen.)

33.—**Upper Third of Femur,** exhibiting caries and complete absorption of the articular face of the head of the bone.

34.—**Longitudinal Section of Upper Third of Left Femur,** exhibiting osteo-malacia.

35.—**Left Femur,** exhibiting oblique fracture in upper third, displacement downwards and inwards of the upper fragment; also extensive exostosis of the head and neck of the bone.

36.—**Superior half of Left Femur,** showing caries of the inferior extremity.

37.—**Left Femur,** exhibiting ununited fracture at junction of middle and lower third; caries, irregular deposit of callus.

38.—**Left Femur** sawed through, exhibiting exteriorly exostosis eburnea, and osteophytes (periostitis). The section shows extraordinary thickening of compact substance, with caries of inclosed cancellated structure, and obliteration of the medullary canal. The immediate sheath of the necrosed diaphysis is an imperfect cylinder of eburnated new bone. There is also absorption of the articular facets of the condyles.

39.—**Right Femur and Upper Ends of corresponding Tibia and Fibula,** articulated; exhibiting ununited oblique fracture of the lower third of femur with necrosis. There is also caries of the articular faces

of the bones forming the joint, due to subsequent extension of the inflammatory process from the seat of fracture.

40.—**Upper Third of Femur,** exhibiting caries of the shaft; necrotic destruction of the head and neck of the bone.

41.—**Left Knee-joint,** with hyperostosis (rheumatoid arthritis) of all the articulated surfaces, and bony union of the patella to the outer surfaces of external condyles.

42.—**Head of Tibia and Condyles of Femur,** showing caries of the articulating surfaces of each.

43.—**Right Knee-joint,** exhibiting caries of the articulating surfaces of the femur and tibia.

44.—**Articulated Right Leg and Foot,** exhibiting osteo-sarcoma of both extremities of the tibia and fibula.

45.—**Articulated Left Foot and Leg with Knee-joint,** including inferior third of femur, flexed by bony anchylosis at a right angle with the bones of the leg.

46.—**Articulated Left Leg of an Infant** (probably a fœtus), exhibiting fracture at junction of middle and upper third of the femur; firmly united by an abundant encircling callus.

47.—**Left Patella and Head of Tibia and Fibula,** showing caries of articulating surfaces. (Rheumatoid arthritis.)

48.—**Right Tibia and Fibula,** exhibiting fracture and partial destruction by necrosis of the former bone.

49.—**Right Tibia and Fibula,** fused by bony union, from a stump after amputation of the foot.

50.—**Right Tibia and Fibula,** exhibiting marked anterior curvature of the former bone. From a case of rickets.

51.—**Left Tibia and Fibula,** evidently from the same case, exhibiting the same deformity.

52.—**Deformity in Clavicles and Ribs after Fracture.**

53.—**Sternum,** exhibiting superficial caries from soft gummy tumor.

54.—**Left Humerus,** exhibiting caries of articulating surfaces of head and condyles, from a case of rheumatoid arthritis.

55.—**Right Elbow-joint,** exhibiting caries of the articular surface of the olecranon process of the ulna.

56.—**Right Elbow-joint,** exhibiting caries on the condyles of the humerus, olecranon process of the ulna and head of radius.

57.—**Right Elbow-joint,** exhibiting osteophytes on the condyles and articular surface of the right humerus and on the ends of the corresponding radius and ulna.

58.—**Right Radius and Ulna,** showing caries of the olecranon of the latter bone.

59.—**Left Radius and Ulna,** exhibiting a united fracture of the lower third of the radius.

60.—**Bones of Left Arm,** forearm, and hand, and of **right Forearm and Hand** of a child, exhibiting caries of the articular surfaces of the left elbow-joint and the upper third of the right ulna.

61.—**Left Knee-joint,** the seat of rheumatoid arthritis.

62.—**Right Knee-joint,** the seat of chronic synovitis.

63.—**Left Knee-joint,** the seat of rheumatoid arthritis.

64.—**Knee-joint,** with capsule remaining, and greatly distended from chronic suppurating synovitis (?)

65.—**Chronic Synovitis of the Ankle-joint,** with ulceration.

66.—**Club-Foot—Pes Equinus.**

67.—**Osteo-sarcoma of Left Great Toe.**

68.—**Osteo-sarcoma of Right Great Toe.**

69.—**Cancer of the Sternum,** with perforation.

70.—**Left Elbow-joint,** the seat of chronic synovitis.

71.—**Chronic Disease of Wrist-joint;** necrosis.

71*a*.—**Fœtus** at $2\frac{3}{4}$ months, prepared in soda solution to show centres of ossification.

NERVOUS SYSTEM.

72.—**Anencephalic Fœtus.**

73.—**Old Cerebral Hemorrhage** with cystic degeneration of clot.

74.—**Hemisphere,** showing aneurism of left middle cerebral artery.

75.—**Embolus in the Basilar Artery** at the junction of the posterior communicating arteries.

76.—**False Membrane in Arachnoid Space.**—Post-mortem record No. 92.

77.—**Meningeal Apoplexy.**

78.—**Melanoma of the Dura Mater.**

79.—**Sarcoma of Dura Mater.**—Internal surface.

80.—**Portion of Dura Mater,** the seat of inflammatory thickening.

80*a*.—**Dura Mater from Brain,** from which cranial vault (Specimen No. 7*a*) was removed, with apertures resulting from ulceration, corresponding in size with the irregular opening in the vault.

81.—**Spinal Cord,** the seat of a new growth, of which the exact nature is unknown.

82.—**Aneurism of Middle Cerebral Artery.**

83.—**Papier Mache Model of Spinal Cord and Cerebellum.**

84.—**Soft Cancer of Orbit.**

85.—**Melanotic Cancer of Orbit.**

86.—**Right Temporal Bone, with Internal Ear** exposed (normal), presented by Dr. Wm. Pepper.

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87.—**Sternum and Integumentary Coverings,** the seat of circular ulcers.

88.—**Specimen of Tattooing.**

89.—**Specimen of Tattooing** (dry).

90.—**Enormously thickened Great Toe Nail.**

DIGESTIVE APPARATUS.

91.—**Extensive Naso-Pharyngeal Ulceration.**

92.—**Cancer of Pyloric end of Stomach.**

93.—**Ulceration of Peyer's Patches and Solitary Glands.**

94.—**Cancer of the Pylorus,** with large cancerous ulcer of the stomach.

95.—**Cancerous Nodules on Inferior Surface of the Diaphragm.**

96.—**Hard Cancer of Head of Pancreas,** with ulceration of duodenum.

97.—**Portion of Small Intestine,** showing transverse tubercular ulceration extending through middle muscular coat.

98.—**Portion of Small Intestine**; ulceration of Peyer's patches and solitary glands.

99.—**Portion of Small Intestine**; uleration of Peyer's patches and solitary glands.

100.—**Portion of Small Intestine**, the seat of thickening, and excavating ulceration.

101.—**Ulceration of Peyer's Patch and of closed Glands.**

102.—**Portion of Small Intestine**, showing an ulcerated Peyer's patch. (Dr. Maury.)

103.—**Portion of Ileum**, the seat of numerous transverse tubercular ulcerations.

104.—**Portion of Ileum**, showing ulceration of the solitary and agminated glands.

105.—**Portion of Small Intestine of a Child 6 months old**, showing commencing ulceration in typhoid fever.

106.—**Large perforating Ulcers in the Small Intestine.**

107.—**Intussusception of Ileum.**

108.—**Intussusception of Ileum into the Colon**, with constriction at the ileo-cœcal valve.

109.—**Diverticulum from Small Intestine.** (Dried preparation.)

110.—**Portion of Small Intestine**, dried on glass, showing distribution of vessels.

111.—**Portion of Large Intestine**, showing ulcerated patches of mucous membrane.

112.—**Portion of Large Intestine**, the seat of thickening and extensive ulceration.

113.—**Ulceration of Colon.**

114.—**Ulceration and Thickening of Colon.**

115.—**Ulcerated Colon.**

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117.—**Ulcerative Disease of Large Intestine.**

118.—**Cancer of Cœcum.**

119.—**Cancer of Cœcum**, with portion of colon.

120.—**Ulcerative Disease of the Cœcum.**

121.—**Follicular Disease of Cœcum and adjacent Large Intestine.**

122.—**Cancer of Rectum.**

123.—**Portion of Jejunum**, the seat of ulceration.

124.—**Portion of Jejunum**, the seat of ulceration.

125.—**Portion of Ileum**, containing ulcerated Peyer's patches.

126.—**Large portion of Ileum**, showing ulcerated Peyer's patches. Also smaller round ulcers at the attachment of the mesentery.

127.—**Portion of Ileum**, showing two ulcerated Peyer's patches; very distinct.

128.—**Portion of Ileum**, showing large ulcerated Peyer's patches.

128*a*.—**Scrotum**, exhibiting congenital hernia.

128*b*.—**Umbilical Hernia.**

128*c*.—**Strangulated Hernia.**

129.—**Cirrhotic Liver** (hobnail).

130.—**Cirrhotic Liver** (hobnail).

131.—**Cirrhotic Liver** (hobnail).

132.—**Portion of a contracted (cirrhotic) Liver.**

133.—**Portion of Liver**, containing a large cancerous nodule.

134.—**Liver, Gall-Bladder, and Kidney of a Child aged 3 months**; peri-nephritic abscess.

135.—**Abscess of the Liver.**

136.—**Abscess of the Liver.**

137.—**Albuminoid Liver and Spleen.**

138.—**Lobulated contracted Liver.**

139.—**Distinct Lobulation of the Liver**, produced by proliferation and contraction of connective tissue, probably syphilitic.

140.—**Large Cancerous Liver.**

141.—**Pigment Sarcoma** (melanotic cancer) of the liver.

141*a*.—**Liver from a Case of Jaundice from Obstruction.**—Partial obliteration of gall-bladder. See a clinical lecture by Dr. James Tyson, on "Jaundice, with remarks on the availability of Pettenkofer's test," in the Philadelphia Medical Times, July 5th, 1873.

142.—**Large Fatty Liver.**

142*a*.—**Enlarged Liver weighing 11 pounds 4 ounces**, from a case of leucocythæmia. From same patient as 146*a* and 260*a*.

143.—**Liver and other Abdominal Viscera**, from a case of peritonitis.

144.—**Granular Tuberculous Peritonitis.**

145.—**Granular Tuberculous Peritonitis.**

146.—**Enormous Hyperplastic Spleen.**

146*a*.—**Enlarged Spleen weighing 5 pounds 10 ounces,** from a case of leucocythæmia. From same patient as 142*a* and 260*a*.

147.—**Hyperplastic Spleen.**

147*a*.—**Enlarged Spleen with Lymphatic Tumors,** from a case of pseudo-leukhæmia. Case of Wm. Sermei.

148.—**Albuminoid Spleen.**

149.—**Embolic Abscess in the Spleen.**

150.—**Tubercular Deposits in Spleen.**

150*a*.—**Syphilitic Gummata in Spleen,** 199*a*.

151.—**Spleen with Capsule thickened;** embolic patches.

152.—**Spleen with Corrugated Capsule.**

153.—**Lobulated Spleen.**

154.—**Spleen-capsule thickened;** embolic patches.

155.—**Spleen, slightly enlarged.**

156.—**Spleen with thickened Capsule.**

157.—**Section of Spleen,** from a case of relapsing fever.

158.—**Section of Spleen,** from a case of relapsing fever.

159.—**Contracted Spleen.**

160.—**Mesenteric Glands and Spleen,** from Hodgkin's disease. From a colored boy, 1871.

161.—**Hyperplasia of Mesenteric Glands.**

162.—**A set of Hyperplastic Mesenteric Glands.**

RESPIRATORY SYSTEM.

163.—**Ulcerative destruction** of left anterior column and epiglottidean folds of a larynx.

164.—**Tongue and Larynx,** apparently normal.

165.—**Tongue, and Larynx** upon which laryngotomy has been performed. Thyroid gland much enlarged. A growth, apparently polypoid, starting from the ary-epiglottidean folds.

166.—**Larynx and Trachea,** with enlarged bronchial glands at beginning of right bronchus.

167.—**Ulceration of Mucous Membrane of Trachea.**

168.—**New Formation in Cavity of Larynx.**

169.—**Larynx with Circular Perforations at the angle of the Thyroid Cartilage,** in which a canula has been worn. The integumentary coverings have cicatrized over it.

170.—**Follicular Ulceration of Larynx.**

171.—**Larynx,** showing ulcerative destruction of vocal cords.

172.—**Larynx,** the seat of a large ulcer.

172*a*.—**Epithelioma of Vocal Cords.**

173.—**Lung containing Cavities.**—Death from sudden hemorrhage. Post-mortem record No. 25.

174.—**Portion of Lung containing a Cavity at its Apex,** mounted apex down.

175.—**Lung with Cavity.**

176.—**Sarcomatous Deposit in Lung.**

177.—**A Pigmented Lung.**

178.—**Large Cheesy Deposit in Lung.**

179.—**Portion of Lung,** the seat of a small new formation.

180.—**Heart and Lung of a Male Child 12 months old,** of which the pleuræ were the seat of plastic inflammation.

181.—**Lungs of an Infant 4 months old,** the seat of miliary tubercles. Emphysema from rupture of air vesicles, especially on anterior face of right upper lobe. Post-mortem record No. 36.

182.—**Section of Lung,** containing small cavity.

183.—**Bronchial Ectasia,** with pneumonic deposit.

184.—**Calcification of Pleura.**

184*a*.—**Pneumonic Phthisis;** softening with resulting small cavities.

185.—**Calcification of Pleura.**—(*See* Proceedings of Pathological Society of Philadelphia, 1868.)

186. **Thickened Pleura;** portions of lung attached.

187.—**Deposits of Metastatic Cancer in Lung,** mostly subpleural; thickening of pleura.

188.—**Lungs.**—The seat of subpleural melanotic deposit.

189.—**Portion of Lung,** with pleuritic deposits partially calcified.

VASCULAR SYSTEM.

190.—**Heart, and Pericardium** which has been the seat of chronic pericarditis. There was also chronic pleurisy. From a case of chronic Bright's disease.

191.—**Pericarditis.**—Extensive deposit of organized lymph on cardiac surface.

192.—**Mitral Constriction and Insufficiency.** Hypertrophy; dilatation of left auricle with perforation of mitral valve.

193.—**Right Ventricle,** showing thickening of the tricuspid valves.

194.—**Tricuspid Orifice,** obstructed by a large fibrinous clot.

195.—**Hypertrophy and Dilatation of Left Ventricle.**—Right ventricle also exposed, showing tricuspid valve in situ.

196.—**Heart, showing Hypertrophy,** with dilatation of the left ventricle and fibrinous clot in the right ventricle.

197.—**Dilatation of Left Ventricle of Heart.**

198.—**Part of Left Ventricle,** showing hypertrophy of the papillary muscles.

199.—**Extreme Mitral Constriction.** Post-mortem record No. 96.

199*a*.—**Button-hole Mitral Orifice,** from same patient as 150*a*.

199*b*.—**Mitral Constriction and Insufficiency,** due to calcareous change and coalescence of the leaflets of the mitral valve, forming a rigid button-hole orifice incapable of closure; thickening of the aortic valves; secondary fatty degeneration of the kidneys. (*See* Proceedings Patholog. Society of Philadelphia, Phila. Med. Times, Jan. 31, 1874.)

200.—**Mitral Constriction and Insufficiency. Hypertrophy of Left Ventricle.**

201.—**Vegetations on the Mitral Valve.**

202.—**Thickening of Aortic and Mitral Valves,** calcareous change in edges of former, vegetations on latter; hypertrophy and dilatation of left ventricle.

203.—**Vegetations on the Aortic and Mitral Valves.**

204.—**Hypertrophied Left Ventricle;** perforating ulcer of aortic valves.

205.—**Aortic Disease;** vegetations; hypertrophy and dilatation.

206.—**Aortic Disease;** calcareous degeneration; hypertrophy and dilatation of heart.

207.—**Thickening of the Aortic Valve**, with union between two leaflets.

208.—**Ulceration and Union by Cicatrization** of two leaflets of the aortic valves.

208*a*.—**Union by Cicatrization** of two leaflets of the aortic valve, after supposed rupture. Also hypertrophy and dilatation of heart. (*See* Philadelphia Medical Times, Oct. 25, 1873.)

209.—**Perforating Ulcer** of the semilunar valves of the aorta.

210.—**Perforating Ulcer** of the semilunar valves of the aorta.

211.—**Hypertrophied Left Ventricle**, attending thickening of aortic valves.

212.—**Disease of Aortic Valves**; vegetations; hypertrophy with dilatation.

213.—**Hypertrophy of the Left Ventricle.** Stenosis and aortic insufficiency; fixation of the valves.

214.—**Dilatation of Heart**, with insufficiency of aortic valves. Calcareous change.

214*a*.—**Aneurism of Ascending Aorta**, dissecting into the walls of the right ventricle, and finally rupturing into the pulmonary artery behind a leaflet of its valve. (*See* Philadelphia Medical Times, Oct. 18, 1873.)

215.—**Aneurism of Arch of Aorta.**

216.—**Aneurism of Aorta**, with carious vertebræ attached.

217.—**Aneurism of the Ascending Aorta.**

218.—**Dissecting Aneurism of the Ascending Aorta.**

219.—**Aneurism of the Ascending Aorta**; atheroma.

219*a*.—**Aneurism of the Ascending Aorta and its Arch.**

220.—**Aneurismal Dilatation of the Aorta**, from its beginning in the left ventricle through its thoracic and part of its abdominal portion. In the latter is a sacculated dilatation filled with a clot.

221.—**Aneurism of the Arch of Aorta**, not recognized before death.

222.—**Aneurism of Thoracic Aorta.**

223.—**Aneurism of Abdominal Aorta**, with attached vertebræ, showing extensive caries of five dorsal vertebræ. (Dry preparation.)

224.—**Aneurism of the Abdominal Aorta**, immediately below diaphragm; mounted to show the relation to vertebræ, the bodies of which exhibit commencing erosion. (Dry preparation.)

225.—**Aneurism of Abdominal Aorta,** immediately above its bifurcation. Mounted to show relation to lumbar vertebræ, the bodies of the third and fourth of which are extensively absorbed. (Dry preparation.)

226.—**Aneurism of Abdominal Aorta,** immediately below diaphragm. Mounted to show relation to vertebræ. Three of which exhibit extensive absorption, opening the spinal canal. (Dry preparation.)

227.—**Communicating Ulcer between Œsophagus and Aorta,** from probable peri-œsophageal abscesses.

228.—**Atheroma of the Aorta,** with fatty destruction of the tunica intima at one or more points.

229.—**Portion of an Aorta,** everted and stuffed; showing atheromatous deposits in the intima.

230.—**Portion of Aorta,** showing beautifully tessellated deposit of calcareous spicules.

231.—**Atheroma of Aorta;** calcareous degeneration.

232.—**Atheroma of Aorta and Branches,** with aneurismal enlargement.

233.—**A Specimen showing the Left Vertebral Artery given off from the Aorta.**

234.—**Obstruction of Saphenous Vein.** (Phlebitis.)

GENITO-URINARY ORGANS.

235.—**Hard Cancer of the Mamma.**

236.—**Hard Cancer of the Mamma.**

237.—**Hard Cancer of the Mamma.**

238.—**Hard Cancer of the Mammary Gland.**

239.—**Cystic Sarcoma of the Mamma.**

240.—**Cystic Epithelioma of the Mammary Gland.**—Dr. Pancoast, Nov. 9, 1867.

241.—**Congenital Degeneration of Right Kidney;** left kidney, ureter, and bladder healthy.

241*a*.—**Horse-shoe Kidney.**

242.—**Cystic Kidney;** capsule immensely thickened.

243.—**Cystic Kidney,** from obstruction. Calculi in situ.

244.—**Large Cystic Sacculated Kidney,** from obstruction by pelvic calculus. Calculus in situ.

244*a*.—**Two Cystic Sacculated Kidneys.**

245.—**Cystic Kidney.**

246.—**Cystic Kidney,** distension of pelvis and ureter.

247.—**Cystic Kidney,** with distension of the pelvis.

248.—**Cystic Kidney.**

249.—**Cystic Kidney,** with calculus impacted in the pelvis, completely obstructing the ureter.

249*a*.—**Large Cystic Kidney,** from which the calculi of No. 317 were taken.

250.—**Enormous Sacculated Kidney,** the result of obstruction by pelvic calculi. The organ measures 11 by 7 inches, and its walls are reduced to a parchment-like thinness; the septa are markedly distinct. Absolutely no secreting structure remains. Obstructing calculus in situ. It exhibits in its shape a mould of the pelvis and of a part of the ureter. (Dry preparation.)

251.—**Kidney with enormously distended Ureter.** (Pyelitis.)

252.—**Cystic Kidney.**—Numerous small transparent cysts displayed on section. One large thin-walled cyst projecting externally from hilus.

253.—**Cystic Kidney.**—Organ entire; large and small peripheral cysts protruding from its cortex.

254.—**Cystic Kidney.**—Transparent cyst the size of a walnut projecting posteriorly from peripheral portion.

255.—**Small Contracted Kidney,** containing small peripheral cysts.

256.—**Contracted Cystic Kidney,** much distended.

257.—**Contracted Kidney,** with remains of peripheral cysts.

258.—**Small Granular Contracted Kidney,** with remains of numerous cysts on its surface.

259.—**Fatty and Contracting Kidney.**

260.—**Enlarged Fatty Kidney.**

260*a*.—**Enlarged Fatty (?) Kidney,** from a case of leucocythemia. From same patient as No. 142*a*, No. 146*a*.

261.—**Smooth White Fatty Kidney.**

262.—**Smooth White Kidney.**

263.—**Cancer of Kidney;** numerous small calculi.

264.—Apparent Rupture of the Kidney.—Aorta and renal artery attached.

265.—Portion of Vertebral Column, from lumbar region, with integumentary coverings and left kidney in situ, showing posterior perforation of the integument by post-renal abscess.

266.—Bladder, enlarged prostate, and penis.

267.—Bladder and Penis, in proper relation to pubic bone, showing contraction of the first organ with thickening of its walls.

268.—Dilated Ribbed Bladder, with Enlarged Prostate.

269.—Dilated Ribbed Bladder, with Penis.

270.—Penis, Bladder, Kidneys, and Dilated Ureter.

271.—Distended Ribbed Bladder with Penis; the latter organ displaying a false passage.

272.—Tumor of the Prostate Gland.

273.—Syphilitic Phimosis of the Penis.

274.—Hydrocele removed from an old man.

275.—Hydrocele.

276.—Hydrocele.

277.—Soft Cancer of Testicle.

278.—Syphilitic Testicle?

279.—Ovary containing Corpus Luteum.

280.—Ovary showing Corpus Luteum.

281.—Concentric Laminated Clot in Ovary.

282.—Suppurative Ovaritis, with perforation into rectum.

283.—Enlarged Uterus.

284.—Sarcoma of the Uterus.

285.—Cancer of Uterus.

286.—Cancer of Uterus.

287.—Cancer of Uterus.

288.—Cancer of Uterus and Vagina.

289.—Primary Cancer of the Vagina.—The neck of the uterus is seen in the middle of the specimen. (Proceedings of Pathological Society of Phila., vol. iv. 1874.)

290.—Fibroid Tumor of the Uterus.

291.—Fibromata of Uterus.—Calcareous.

292.—**Intramural Fibromata of Uterus.**

293.—**Fibroid Tumor of Uterus.**

294.—**Fibromata of the Uterus.**—Calcareous degeneration.

295.—**Fibroid Tumor of Uterus.**—Calcareous. From an old colored woman.

296.—**Section of an Ovoid Calcareous Tumor of the Uterus,** 3 inches by 2 inches.

297.—**Fibroma of the Uterus.** From a colored woman aged 60 years. Post-mortem record No. 44.

298.—**Fibroid Tumor of the Uterus.**

299.—**Intrauterine Fibromata.**—Calcareous degeneration.

300.—**Huge Fibroid Tumor of Uterus,** partially calcareous.

301.—**Large Inflated Ovarian Cyst.** (Dry.)

302.—**Cystic Distension of Fallopian Tubes.** (Dry preparation.)

303.—**Uterus with Placenta.**

304.—**Hydatid Mole.**

305—**Elephantiasis of Vulva.**

TUMORS NOT CLASSIFIABLE ACCORDING TO LOCALITY.

306.—**Portion of Keloid** (about ¼ of entire mass removed by Dr. Maury).

307.—**Parotid Tumor,** from an old man in medical wards.

308.—**Fibroid Tumor,** from the back.

309.—**Small Fibroma.**

310.—**Fibroma,** removed from left tibia.

311.—**Fibroma,** from vicinity of patella.

312.—**Fibroma Molluscum.**

313.—Tumor with calcareous change in its structure. Seat unknown.

314.—Sarcoma of Thigh.

315.—Lipoma of Perineum.

CALCULI, CONCRETIONS, ETC.

316.—Cast of a Large Salivary Calculus. (From a horse.)

317.—Five Phosphatic Calculi, removed from the pelvis of a cystic left kidney—specimen No. 249*a*. One irregularly ovoid, 4 inches long, 1½ in diameter, weighing 4½ ounces in moist condition, 3⅞ ounces dry. A second ovoid, 3 inches in longer, 1¾ in shorter diameter, weighing in moist condition at removal 3½ ounces, when dry 3¼ ounces. A third, irregularly spherical, made up of a nucleus and concentric layers. A fourth and fifth of smaller size and irregular shape. Total weight at removal 10½ ounces; total when dry 8¼.

318.—Gall Stones, from liver of Ann Lecky.

319.—Phosphatic Calculus, 2 inches by ½ inch, constricted in middle. Probably from pelvis of kidney.

320.—Renal Mulberry Calculus (oxalate of lime), 1 by ½ inch. In box.

321.—Concretions from Appendix Vermiformis, causing fatal peritonitis. (In box.) Presented by Dr. James Tyson. (*See* Proceedings of Patholog. Society of Philadelphia, Phila. Med. Times, Jan. 31, 1874.)

322.—Gall Stone, of unusual size, nearly spherical—1 in. in diameter. The only one in the gall-bladder of a female.

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